Substitute for form 1449/PTO (Revised 07/2007)  INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)  Sheet 1 of 1						Application Number Filing Date First Named Inventor Art Unit  Examiner Name Attorney Docket Number			Complete if Known  10/696,180 October 28, 2003 Bob Myrick 3629  Kimberly L. Evans 018360/270350				
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Examiner Initials*	Cite No.	Document Number  Number - Kind Code (if known)			Pul	Publication Date MM-DD-YYYY Ap			Name of Patentee or Applicant of Cited Document		Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear		
	1	US-	-2002/0156645 A1		10-	10-24-2002		Pau	l E. Hansen				
		US-											
		US-	-										
	•			FOR	REIG	N PATENT	DO	CUME	ENTS				
Examiner Initials	Cite No.		Foreign Patent Document  Country Code - Number Kind Cod (if known)			Publication D		Name of Patentee or Applicant of Cited Document			Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		English Language Translation Attached
	2	WO 01/97101 A2				12-20-2001		Love, et al.					
	1				O	THER DOC	UM	ENTS					
Examiner Initials*	Ci No		Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.								English Language Translation Attached		
	3		Canadian Office Action dated February 15, 2012, for Canadian Application No. 2,504,285.										
Examiner Signature									Date Considered				

<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.